

Local Educational Agency (LEA) Service: Speech Therapy

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This section contains information about speech therapy services rendered in connection with the Local Educational Agency (LEA) Medi-Cal Billing Option Program.

- Qualifications that practitioners must meet to render services are outlined in the *Local Educational Agency (LEA) Rendering Practitioner Qualifications* section of this manual.
- Modifier descriptions are located in the *Modifiers: Approved List* section of this manual. Additional modifier information is in the *Local Educational Agency (LEA) Billing and Reimbursement Overview* section of this manual.
- Individualized Education Plan (IEP) and Individualized Family Services Plan (IFSP) are defined in the *Local Educational Agency (LEA): Individualized Plans* section of this manual.

Speech Therapy

Speech therapy is the application of principles, methods and instrumental and noninstrumental procedures for measurement, testing, screening, evaluation, identification, prediction and counseling related to the development and disorders of speech, voice, language or swallowing. Speech-language services also include preventing, planning, directing, conducting and supervising programs for habilitating, rehabilitating, ameliorating, managing or modifying disorders of speech, voice, language or swallowing and conducting hearing screenings.

Covered Services

Speech therapy services include:

- IEP/IFSP speech-language assessments
- Non-IEP/IFSP developmental assessments and hearing assessments (includes screening test – pure tone and pure tone audiometry – threshold)
- Speech therapy treatments, including individual and group treatments

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Rendering Practitioners: Reimbursable Services

The following chart indicates the services that are reimbursable to LEAs when performed by a licensed speech-language pathologist or speech-language pathologist.

Qualified Practitioners	Reimbursable Services
Licensed speech-language pathologists	IEP/IFSP speech-language assessments
Speech-language pathologists	Non-IEP/IFSP developmental assessments and hearing assessments (includes screening test – pure tone and pure tone audiometry – threshold)
	Speech therapy treatments, including individual and group treatments

Referrals

Speech-language assessments, developmental assessments and hearing assessments (screenings) require a written referral by a physician or dentist within the practitioner's scope of practice (*California Code of Regulations* [CCR], Title 22, Section 51309[a]). The written referral must be maintained in the student's files. In substitution of a written referral, a registered credentialed school nurse, teacher or parent may refer the student for an assessment. The registered credentialed school nurse, teacher or parent referral must be documented in the student's files.

Speech therapy treatment services require a written referral by a physician, dentist or licensed speech-language pathologist within the practitioner's scope of practice (CCR, Title 22, Section 51309[a] and 42 *Code of Federal Regulations*, Section 440.110[c]). If a written referral is provided by a licensed speech-language pathologist, the LEA must also develop and implement Physician Based Standards (see "Physician Based Standards" in this section for more information). The written referral must be maintained in the student's files. For students covered by an IEP or IFSP, the physician, dentist or licensed speech-language pathologist referral may be established and documented in the student's IEP or IFSP.

**Physician Based
Standards**

If the individual written referral is provided by a licensed speech-language pathologist, the LEA must develop and implement Physician Based Standards. Physician Based Standards must establish minimum standards of medical need for referrals to speech therapy treatment services. The standards must be reviewed and approved by a physician. Additionally, the LEA must ensure that the standards are subsequently reviewed/revised and approved by a physician no less than once every two years. The following documentation must be maintained and available for State and/or Federal review.

- In each student's file:
 - A copy of the cover letter signed by the physician that states the physician reviewed and approved the protocol standards. The cover letter must include contact information for the physician.
 - Proof that the services rendered are consistent with the protocol standards.
- In the LEA's file:
 - A printed copy of the protocol standards.
 - Contact information for individuals responsible for developing the protocol standards.
 - Contact information for the practitioners who have reviewed and rely upon the protocol standards to document medical necessity.

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Supervision Requirements

The following chart indicates whether a rendering practitioner requires supervision to provide speech therapy services.

Qualified Practitioner	Supervision Requirement
Licensed speech-language pathologist	No supervision required to provide speech therapy services
Speech-language pathologist with a valid clinical or rehabilitative services credential with an authorization in language, speech and hearing or a valid credential issued prior to the operative date of Section 25 of Chapter 557 of the Statutes of 1990	Requires supervision by a licensed speech-language pathologist to provide speech therapy services

Supervising Speech-Language Pathologist

The supervising licensed speech-language pathologist must be individually involved with patient care and accept responsibility for the actions of the credentialed speech-language pathologist under his or her supervision. The amount and type of supervision required should be consistent with the skills and experience of the credentialed speech-language pathologist and with the standard of care necessary to provide appropriate patient treatment.

The annual duties of the supervising speech-language pathologist include, but are not limited to:

- Periodically observing assessments, evaluation and therapy
- Periodically observing preparation and planning activities
- Periodically reviewing client and patient records and monitoring and evaluating assessment and treatment decisions of the credentialed speech-language pathologist

The licensed practitioner must see each patient at least once, have some input into the type of care provided, and review the patient after treatment has begun.

A licensed speech-language pathologist must be available by telephone (conventional or cellular) during the workday to consult with the credentialed speech-language pathologist, as needed.

Service Limitations: Annual

Speech therapy services that are not authorized in a student's IEP or IFSP are limited to 24 services (assessment, treatment or transportation services) per 12-month period per student.

Speech therapy services that are authorized in a student's IEP or IFSP and documented as medically necessary may be rendered beyond the 24 services per 12-month period. The 12-month period begins on July 1 of each year.

Claim completion: Information about modifiers to ensure accurate processing of services rendered under an IEP or IFSP is located in the *Local Educational Agency (LEA) Billing and Reimbursement Overview* section of this manual.

Service Limitations: Daily

Speech therapy treatment services are limited to 24 units per student per day. This daily limitation includes a maximum of three initial service increments (3 x 15 = 45 minutes) and 21 additional service increments.

Non-IEP/IFSP developmental assessments are limited to four units per student per day.

Non-IEP/IFSP hearing assessments (screenings) are limited to one per student per day.

Initial and Additional Treatment Services

An LEA provider may bill each type of speech therapy initial service (individual or group) once per student per day. The initial service for speech therapy is based on 15 – 45 continuous minutes; one unit may be billed for each 15-minute increment. A maximum of three units may be billed for the initial service; all units are reimbursable under one initial service maximum allowable rate.

Additional services are billed when more than 45 minutes are spent on the initial service. Additional services are billed in time increments of 15 minutes, and may be rounded up when seven or more continuous minutes are provided (CCR, Title 22, Sections 51507[b][5] and 51507.1[b][4]). Additional LEA services must be billed in conjunction with an initial service treatment CPT-4 code. If the student receives more than one treatment session per day (for example, two speech therapy sessions at different times during the day), the total treatment time for the second session must be billed as additional treatment services.

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Procedure Codes/Service Limitations Chart: Speech Therapy

The following chart contains the CPT-4 procedure codes with modifiers, if necessary, to bill for speech therapy services. Service limitations also are included.

Reimbursement rates for these services are in the *Local Educational Agency (LEA) Billing Codes and Reimbursement Rates* section of this manual.

Procedure Code/ Modifier	LEA Program Usage	LEA Limitations (Per Student)
IEP/IFSP Assessments		
92506 GN TL (IFSP)	Initial IFSP speech-language assessment	One per lifetime per provider
92506 GN TM (IEP)	Initial or triennial IEP speech-language assessment	One every 15 months per provider
92506 52 GN TL (IFSP) or 92506 52 GN TM (IEP)	Annual IEP/IFSP speech-language assessment	One every 12 months per provider when an initial or triennial IEP/IFSP speech-language assessment is not billed
92506 TS GN TL (IFSP) or 92506 TS GN TM (IEP)	Amended IEP/IFSP speech-language assessment	One every three months per provider <u>when an initial/triennial or annual IEP/IFSP speech-language assessment is billed</u>
Non-IEP/IFSP Assessments		
96110 GN	Developmental assessment, each completed 15-minute increment (applies to initial assessment and re-assessment)	4 units per day 24 services (assessment, treatment or transportation services) per 12-month period
92551 GN	Hearing assessment, per encounter (screening test, pure tone, air only)	One per day 24 services (assessment, treatment or transportation services) per 12-month period
92552 GN	Hearing assessment, per encounter (pure tone audiometry, threshold, air only)	One per day 24 services (assessment, treatment or transportation services) per 12-month period

Procedure Code/ Modifier	LEA Program <u>Usage</u>	LEA Limitations (Per Student)
Treatments		
92507 GN TL (IFSP) or 92507 GN TM (IEP) or 92507 GN (non-IEP/IFSP)	Speech therapy initial service, 15 – 45 continuous minutes, individual (bill 1 unit per 15-minute increment)	3 units per day See “Service Limitations: Annual” for additional information
92507 22 GN TL (IFSP) or 92507 22 GN TM (IEP) or 92507 22 GN (non-IEP/IFSP)	Speech therapy service, additional 15-minute increment, individual	21 units per day See “Service Limitations: Annual” for additional information
92508 GN TL (IFSP) or 92508 GN TM (IEP) or 92508 GN (non-IEP/IFSP)	Speech therapy initial service, 15 – 45 continuous minutes, group (bill 1 unit per 15-minute increment)	3 units per day See “Service Limitations: Annual” for additional information
92508 22 GN TL (IFSP) or 92508 22 GN TM (IEP) or 92508 22 GN (non-IEP/IFSP)	Speech therapy service, additional 15-minute increment, group	21 units per day See “Service Limitations: Annual” for additional information